

FEB 01 2006

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

FACSIMILE COVER SHEET

Deliver to: Sajous, Wesner, USPTO Art Group: 2676
Facsimile No.: 571-873-8300 Date: February 1, 2006
From: William W. Schaal, Reg. No. 39,018
Our Docket No.: 80398P360 Number of pages 14 including this sheet.
Application No.: 09/735,572 Filing Date: 12/12/2000
Docket Due Date(s): 2/1/2006

Enclosed are the following documents:

- ☒ Amendment: _____ Response (10 pgs)

☐ Appeal Brief (_____ pgs)

☐ Application: _____
 (_____ pgs) w/cover & abstract

☐ Assignment & Cover Sheet (_____ pgs)

☒ Certificate of Facsimile _____

☐ Continued Prosecution Application (CPA)

☐ Declaration & POA (_____ pgs)

☐ Drawings: _____ sheets, _____ figures

☐ Extension of Time: _____

☒ Fee Transmittal (in duplicate)

☐ IDS & PTO/SB/08 (_____ pgs)

☐ Other _____

☐ Issue Fee Transmittal

☐ Notice of Appeal

☐ Petition for: _____

☐ Request for Continued Examination (RCE)

☐ Reply Brief (_____ pgs)

☐ Request & Certification Under 35 USC 122(b)(2)(B)(ii)

☐ Request to Rescind Previous Nonpublication Request

☐ Response to Notice of Missing Parts & Formalities Letter

☐ Response to Written Opinion (_____ pgs)

☐ Terminal Disclaimer

☐ Transmittal of Publication Fee Due

☒ Transmittal Letter

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

I hereby certify that this correspondence is being transmitted by facsimile on the date shown below to the United States Patent and Trademark Office.

e. Susan McFarlane 2/1/2006
Susan McFarlane Date

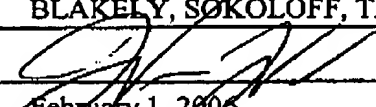
Confidentiality Note: The documents accompanying this facsimile transmission contain information from the law firm of Blakely, Sokoloff, Taylor & Zafman which is confidential or privileged. The information is intended to be for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, be aware that any disclosure, copying, distribution or use of the contents of this faxed information is prohibited. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the retrieval of the original documents at no cost to you.

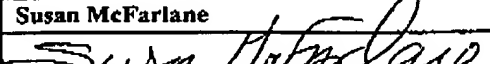
If you do not receive all the pages, or if there is any difficulty in receiving, please call: (714) 557-3800 and ask for Susan McFarlane.

FEB 01 2006

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/735,572
		Filing Date	December 12, 2000
		First Named Inventor	Eric Edwards
		Art Unit	2676
		Examiner Name	Sajous, Wesner
Total Number of Pages in This Submission	13	Attorney Docket Number	80398P360

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	February 1, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane		
Signature		Date	February 1, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/1) 11/30/2005.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

P. 3
RECEIVED
CENTRAL FAX CENTER

FEB 01 2006

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		<i>Complete if Known</i>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Application Number	09/735,572
		Filing Date	December 12, 2000
		First Named Inventor	Eric Edwards
		Examiner Name	Sajous, Wesner
		Art Unit	2676
TOTAL AMOUNT OF PAYMENT		(\$)	0.00
		Attorney Docket No.	80398P360

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☐ Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION**1. EXTRA CLAIM FEES**

		Extra Claims	Fee from below	Fee Paid
Total Claims	22	33*	0	\$0.00
Independent Claims	3	6*	0	\$0.00
Multiple Dependent				

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	350	2203	180	Multiple Dependent claim, if not paid
1204	750	2204	325	**Reissue independent claims over original patent
1205	900	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)				(\$)

*or number previously paid, if greater. For Reissues, see below


2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,600	2254	765	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	600	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify): _____					
SUBTOTAL (2)				(\$)	

SUBMITTED BY*Complete (if applicable)*

Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature		Date	02/01/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/ 12/15/2004).
 SEND TO: Commissioner of Patents, P. O. Box 1456, Alexandria, VA 22315-1456

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	William W. Schaaf	Registration No. <i>(Attorney/Agent)</i>	39,018	Telephone	(714) 557-3800
Signature				Date	02/01/06

PAGE 4/14 * RCVD AT 2/1/2006 5:44:45 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/33 * DNIS:2738300 * CSID:7145573347 * DURATION (mm-ss):03-54

Appl. No. 09/735,572
Amdt. Dated 02/01/2006
Reply to Office Action of October 1, 2005

**RECEIVED
CENTRAL FAX CENTER**

FEB 01 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. : 09/735,572
Applicant : Eric Edwards
Filed : 12/12/2000
TC/A.U. : 2676
Examiner : Wesner Sajous

Confirmation No. 5737

Docket No. : 80398.P360
Customer No. : 8791

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office action of November 1, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.